

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | HL | | 7-20-01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | S.B. | 895 | 08-21-01 |
| RESPONSE FORMALITY REVIEW | EP | 1027 | 11-08-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

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861
 11-08-01
 530
 08/21/01